

6.1 MEETINGS/PUBLIC PARTICIPATION

NIH has conducted a rigorous and active public participation program and consultation with government agencies in developing the Bethesda campus Master Plan and the 2003 update. The program has conformed to the requirements of the <u>Regulations for Implementing the Procedural Provisions of the National Environmental Policy Act</u>, U.S. Council on Environment Quality, 1978 as amended; <u>Environmental Policy and Procedures</u>, NCPC, 1979 as amended; and the guidelines given in the <u>Bethesda Chevy Chase Master Plan</u>, M-NCPPC, 1990, for cooperative consultation on prospective growth at NIH.

Through this program, NIH has provided information on concepts, alternatives, and proposed facilities in the Master Plan to government agencies, NIH management and employees, and local citizens. In turn, NIH has sought and given these groups the opportunity to express, and local citizens. In turn, NIH has sought and given these groups the opportunity to express opinions on proposed concepts and plans, ask questions, and identify issues, concerns and potential impacts.

6.1.1 The 1995 Master Plan

The 1995 Master Plan public participation process is detailed in Section 6 of the Final Environmental Impact Statement for the 1995 Master Plan, NIH, 1995. A summary follows. The public participation process began at the earliest stages of project development, NIH circulated a letter of notification to pertinent federal, State, and local review agencies and jurisdictions, elected officials, and citizen associations. The letter noted that a Master Plan for the Bethesda campus would be prepared, that future scoping meetings would be held, and invited comment. Separate scoping meetings were held for government review agencies and local jurisdictions, NCPC and M-NCPPC, NIH employees, and the general public.

As work progressed, over 50 general meetings were held with agencies and the public to coordinate on issues, keep them informed, and involve them in the decision making process. In the initial phase of the project, NIH cooperatively established a NIH Neighbor Council composed of representatives from the residential communities in the environs of the Bethesda campus meeting. Meetings were open to the public, and interested parties or individuals from more peripheral communities had the opportunity to attend. Other organizations in proximity to the campus whose plans and facilities could be directly affected by NIH proposals were also invited to participate.

In September 1994, NIH established an Office of Community Liaison to promote collaboration between NIH and the surrounding communities organizations, and elected officials. Under the auspices of the Office of Community Liaison, 77 community groups and organizations were invited to participate in an expanded citizen participation program for master plan development. A Core Community Working Group was formed from representatives of twenty-four community organizations that chose to actively participate. The remaining communities were kept informed of activities through regular mailings.

Agency liaison members included representatives of the National Capital Planning Commission, the Maryland-National Capital Park and Planning Commission, the Maryland Office of Planning, the Bethesda-Chevy Chase Chamber of Commerce, and Montgomery County Council Staff. The Community Working Group was comprised of a Master Plan core group, and environmental, adjacency/site amenities, and transportation and traffic subgroups, which discussed these issues in greater detail. Many of the early meetings were open to discussion of any topic or issue of concern about NIH and its operations. A series of more than two dozen meetings were held on twelve successive dates, with increasing emphasis on Master Plan development in the latter half of the participation period. This phase of the public process was instrumental and influential in shaping the 1995 Draft Master Plan Alternative.

NIH received extensive written comment during 1995 Master Plan development. (<u>Final Environmental Impact Statement</u>, Vol. 2 of 2, <u>Correspondence for the 1995 Master Plan</u>, NIH, 1995). Eleven early coordination letters were received in the scoping process. A total of 44 letters were received in response to circulation of the Draft Master Plan and Draft Environmental Impact Statement (EIS), and Draft EIS Supplement. NIH prepared written responses to each comment or question (ibid.).

Section 5(a) of the National Capital Planning Act of 1952, as amended (40 U.S.C.§ 71d(a)), provides that each federal agency in the National Capital Region shall advise and consult with the National Capital Planning Commission (NCPC) in the preparation of master plans and programs which can affect the Comprehensive Plan for the National Capital. If the installation is in the Maryland portion of the National Capital Planning Region, then the Maryland-National Capital Park and Planning Commission (M-NCPPC) acts as an advisory capacity to NCPC.

The 1995 Bethesda campus Master Plan and environmental documentation went through the NCPC/M-NCPPC review process. In its review of draft documents, NCPC noted in its comments to NIH that the 1995 Master Plan submitted by NIH:

"...represents a thorough and comprehensive planning effort. The Commission commends the NIH master planning team for its creative and practical framework which will guide new development while enhancing the campus-wide physical setting. We believe that implementation of the Master Plan will result in a superior design and a greatly improved functional arrangement of buildings, circulation, and landscaping.

In many ways, this Master Plan serves as a model for other federal installations to follow. The Master Plan and supporting technical reports are among the highest quality ever submitted to the Commission. The text is clear and concise, and abundantly illustrated with maps, sketches, and photographs. In substance, the documents are also exemplary."

The Commission also noted:

"The Commission appreciates your substantial effort to encourage community involvement in the development of the Master Plan. Your efforts stand as a good example of federal cooperation with neighboring communities and local jurisdictions. Your extensive community outreach program has been quite successful in building trust and goodwill between NIH and the community. This is particularly significant in light of the difficult relationship of only a few years ago. Particularly noteworthy is the willingness of NIH to change aspects of the Master Plan in response to suggestions and concerns expressed by community representatives and planning agencies' staff participating the Master Plan Working Group."

In accordance with 42 U.S.C. 4332(2)(c), NIH held more formal meetings that were advertised in the local newspaper and open to the general public. Approximately 70 people attended a public hearing on the 1993 Draft Master Plan held at 7 PM in December 1993, in the Clinical Center Mazur Auditorium on the NIH Bethesda campus. NIH representatives were on hand prior to the hearing to informally receive comments, explain the project, and answer questions on a one-on-one basis. Brief presentations were made by NIH representatives on the programmatic interviews used to project future NIH employee and space needs; the Master Plan and the process used to derive it; and a summary of the MOU, traffic, noise impacts and mitigation. Seventeen citizens representing community organizations or themselves presented comments.

Approximately 50 people attended a public hearing on the 1995 Draft Master Plan and associated Draft EIS Supplement in September 1995. The hearing was held at 7:30 PM in the Natcher Building

Auditorium on the NIH Bethesda campus. NIH representatives were on hand from 5:30 to 7:30 PM prior to the hearing to informally receive comments, explain the project and specific features of interest, and answer questions on a one-on-one basis with citizens. Brief presentations were made on the community participation process used in development of the project, Master Plan planning premises, the principal proposals with the Master Plan, and subsequent NEPA review and project approval schedule. Three citizens representing community organizations or themselves gave oral testimony and comment.

6.1.2 Draft Master Plan 2003 Update

The public involvement program has continued since 1995. In the interim, NIH has implemented or is in the process of implementing projects proposed in the 1995 Master Plan. When applicable, NEPA documentation has been prepared for these projects. Review agencies, local jurisdictions, elected officials, and the NIH Community Liaison Council have been involved with review of these projects as they pass through the implementation process. As a result, they are familiar with campus conditions and NIH plans and projects.

The Master Plan 2003 update is primarily revision of the 1995 Master Plan accounting for interim changes. For this and the above reasons, no formal scoping meetings were held. Jurisdicational and review agency scoping was accomplished by letter to an updated list of recipients derived from the 1995 Master Plan FEIS distribution list. The local community was informed that the project was underway through the Office of Community Liaison newsletter, the OCL Update, and by presentation to the Community Liaison Council on June 21, 2001. Community associations or individuals not currently affiliated with the Community Liaison Council were invited to participate in the planning process.

NIH did not received any written comment in response to the scoping or early coordination process.

NIH held kick off or scoping meetings with NCPC and M-NCPPC staff on June 4 and June 18, 2001, respectively. NIH representatives informed the staffs that the Master Plan Update was starting. A brief presentation was made at each meeting on future site employee projections as derived from programming with NIH Institute, Center, and Division leadership. The commission staffs asked a number of general questions, but had no substantive comment on issues or requirements. The same presentation was made to the Community Liaison Council at their monthly meeting on June 21, 2001.

As part of its ongoing public involvement program, NIH has established three working groups which bring the community into the planning process. Each is composed of NIH representatives, interested citizens, and community organizations. The three groups are devoted to three broad areas of interest as defined by citizen members: Environmental Impacts, and Transportation, and Construction issues. Each group held a series of meetings between July and November, 2001. To ensure participation and provide a deeper understanding of planning issues, information was presented on existing conditions, analytical methods, and potential resultant impacts for discussion.

Topics covered by the Environment Impact Working Group included the perimeter buffer, campus trees, cultural assets, wastes, utility systems and demands, stormwater management, traffic noise and air quality, and power plant noise and air quality. The Transportation Working Group discussed vehicle traffic, transit, parking, and transportation management, not only as it related to the NIH Bethesda campus itself, but also to the Bethesda Central Business District and Bethesda-Chevy Chase planning area. Discussions in the Construction Impact Working Group centered on construction truck traffic, and construction dust and noise impacts.

Publication of the Draft Master Plan and EIS were originally scheduled for October 2001. National

events in the previous month put the plan on hold. Much of the intervening period was used to identify, develop, and evaluate measures that would be necessary at NIH Bethesda to respond to the past September 2001 environment. Once the measures were established conceptually, their effects on the Master Plan were evaluated, and the Draft Master Plan revised accordingly.

The Environmental Impact and Transportation Working Groups met in October 2002 to discuss the changes in impacts generated by the revised plan. Presentations summarizing the changes were made to the Community Liaison Council at their monthly meetings on October 25, 2002 and March 20, 2003. Representatives of the M-NCPPC and NCPC staffs were invited to the meetings.

The Draft Master Plan 2003 Update and accompanying Draft EIS were published on October 1, 2004. The U.S. EPA Notice of Availability was published in the Federal Register on the same date. The documents were made available in printed and electronic (compact disk) format, and at the NIH website (http://orf.od.nih.gov/masterplan2003.htm). Approximately 150 copies were circulated to government elected officials and review agencies, local citizen association representatives, and interested parties exclusive of electronic availability (see Appendix E). Eight copies were distributed among Montgomery County libraries. A 60 day comment period was established with comment received accepted through November 29, 2004.

A summary presentation of the Draft Master Plan 2003 Update and EIS was made at the NIH Community Liaison Council meeting on October 21, 2004. The meeting was attended by representatives of the organizations indicated in Table 6-1. At the meeting, the various forms of document availability were noted, and review, and comment encouraged. The comment period deadline and the intent of NIH to hold a public meeting during the comment period were also noted.

In accordance with the National Environmental Policy Act (NEPA), NIH held a project public meeting on November 9, 2004 at 7:00 PM at Walter Johnson High School, which is located about two miles to the north of the campus. Approximately 25 people were in attendance. Brief presentations were given on the project NEPA review and comment process, the Master Plan 2003 Update and its major features, and a summary of the findings related to potential environmental impacts. Handouts included a summary of the verbal presentation and comment forms. The floor was opened to attendees who wanted to make verbal statements. A summary of oral comment received is given in Section 6.2. NIH representatives were available before and after the meeting to explain the project, informally receive comment, and answer questions on a one-on-one basis with citizens.

The Draft Master Plan 2003 Update and Draft EIS were reviewed by the National Capital Planning Commission (NCPC) staff in the fall of 2004. The Commission approved the two Draft documents at

Palladian Partners, Inc.

Montgomery County Civic Federation

Huntington Terrace Citizens Association

Sonoma Citizens Association

Bethesda Parkview Citizens Association

Wyngate Citizens Association

Whitehall Condominium Association

Locust Hill Civic Association

Edgewood Glenwood Citizens Association

Maplewood Citizens Association

Recreation & Welfare Association, NIH

NIH Alumni Association

TABLE 6-1 REPRESENTION AT COMMUNITY LIAISON COUNCIL MEETING (10/21/2004).

their meeting on January 6, 2005 with two provisions, that NIH should: (1) finalize a campus Forest Conservation Plan and (2) update the Bethesda campus Transportation Management Plan to determine a suitable parking space per employee ratio goal for the campus.

6.2 DRAFT MASTER PLAN 2003 UPDATE COMMENT

NIH received written comment through the review associated with public circulation of the Draft Master Plan 2003 and Draft EIS as part of the NEPA process, and at the public meeting. The written comments and NIH responses are attached in Appendix H. The verbal comments received at the public hearing and NIH responses are summarized below.

 NIH Bicycle Commuter Club Montgomery Bicycle Advocates (MOBIKE)

Representatives of these organizations commented on bicycling conditions in the vicinity of the NIH Bethesda campus (see Appendix H for additional MOBIKE written comment). They stressed the need for safer biking conditions on and within the vicinity of the campus, and the importance of the North Bethesda Trolley Trail (NBTT), which is planned to run between the White Flint Metrorail station and the Bethesda CBD. They noted that the existing sidewalk along Old Georgetown Road on the west side of the campus, and the NIH pedestrian path along the southern periphery of the campus, do not meet the Montgomery County bike trail standards. Both are on the route of the NBTT. They requested or encouraged NIH's cooperation in implementing bicycle trail improvements.

NIH response: See responses to the Washington Area Bicyclist Association letter in Appendix H, which includes similar comments.

• Edgewood/Glenwood Citizen Association

The representative of this community organization expressed concern about a previously proposed natural gas pipeline what would have served NIH exclusively, and safety issues related to the pipeline. The Final Master Plan and EIS should contain language that would protect residents.

NIH response: See new text in EIS Section 5.4.7.

• Huntington Terrace Citizen Association

The association representative noted that the Draft EIS and Master Plan do not include any discussion of noise generated (by mechanical equipment) at individual buildings, which has become an issue on the west side of the campus. Inclusion of such information in the Final documents is needed to avoid or reduce the problem in the future.

NIH response: NIH concurs. See new text in Master Plan Section 5.5.4, and in EIS Section 5.5.4.

A resident of Maplewood

The commenter covered a number of points, each of which are responded to individually for clarity.

(1) The NIH citizen advisory committee members should be appointed by the Montgomery County government.

NIH response: Members of the NIH Community Liaison Council are determined by the organizations and community or neighborhood associations that they represent.

(2) Provide housing on campus for researchers, particularly those working on the campus under temporary assignment.

NIH response: NIH did maintain such housing on campus prior to 1995 (demolished Building 20). Programming analysis completed for the 1995 Bethesda campus Master Plan determined that housing of employees on campus was not the most efficient use of ground space, when campus function and purpose are considered as a whole, i.e. nearly all potentially developable campus areas are needed for research buildings, or those directly related to research support.

(3) Code compliant bike loop is needed around the campus perimeter.

NIH response: See responses to Washington Areas Bicyclist Association in Appendix H.

(4) Shelters are needed at campus shuttle and public bus stops.

NIH response: Most of the campus shuttle stops already have shelters or are located under building entrance canopies. The Master Plan proposes covered waiting areas at all remaining campus shuttle stops (See Master Plan Section 5.3.7). Shelters in public space outside NIH are the responsibility of public transit systems (WMATA and Montgomery County Ride-On). The bus stop and campus shuttle bays at the Medical Center Metrorail station have shelters.

(5) (NIH employee) off campus parking should not be considered as mitigation.

NIH response: It is not identified as mitigation in Table 1-1. However, off campus parking does have the indirect benefit of reducing NIH traffic at the intersections around the periphery of the campus.

(6) Recommend a "bike transit station" at the Medical Center Metrorail station where bikes could be rented for use on the campus.

NIH response: NIN has already explored this concept with bike use by either employees, the general public, or both. Unfortunately, there are a number of legal difficulties regarding agency ownership and funding, damage and injury liability, and use of government property by private parties associated with such a facility, and implementation is not feasible at this time.

(7) NIH should have a fire chief, fire protection engineering personnel. NIH should coordinate and cross train with the Montgomery County Fire Department.

NIH response: NIH does have a fire marshal. The Division of Fire and Rescue Services provides fire, emergency medical, hazardous materials, and specialized rescue services regarding laboratory and hospital fires. The NIH Fire Department cooperates with the County and National Naval Medical Center (NNMC) in mutual response assistance. Each year, typically, the County and NNMC respond to approximately 100 incidents at NIH Bethesda, and NIH responds to about 200 County or NNMC incidents outside the campus.